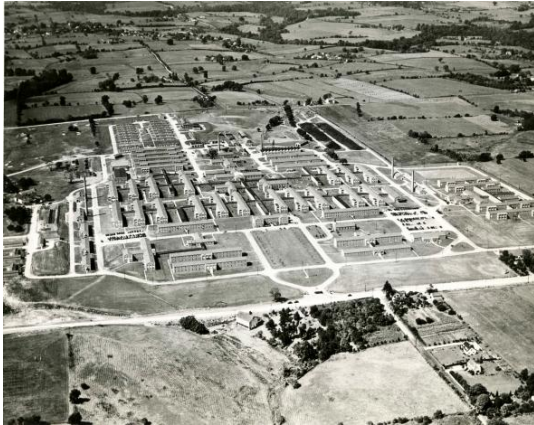


Warrior Transition Command

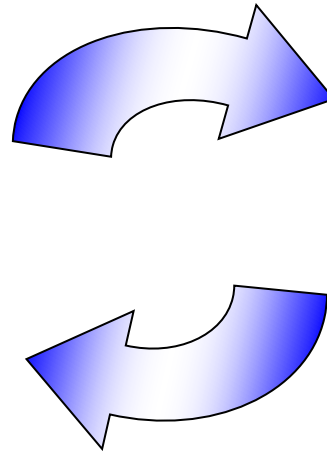
Recovering Warrior Task Force

**COL Dave Bair, COL Suzanne Scott,
Ms. Sherri Emerich**

Valley Forge General Hospital, Phoenixville, PA



9 December 2011



Wakeman General Hospital, Camp Atterbury, IN



Agenda

- WTC Mission
- Continuum of Care
- How we see ourselves
- WTC Holistic Training Continuum
- Cadre Training Evolution
- AMEDD C&S Mission/Vision
- Course Background
- Resident Courses
- RWTF Questions
- Case Management
- Clinical Leader Orientation
- Best Practices, Innovations and Sharing
- Conclusion

WTC Mission

Wounded



Illness



Injured



Provide **centralized oversight**, **guidance** and **advocacy** empowering wounded, ill and injured **Soldiers**, **Veterans** and **Families** through a comprehensive transition plan for successful reintegration back into the force or into the community with dignity, respect and self-determination.



How We See Ourselves

Feedback

- DAIG: OCT 2010
- DOD IG: SEP 2011
- RWTF Annual Rpt: SEP 2011
- 11 OIPs: Feb-Dec 2011

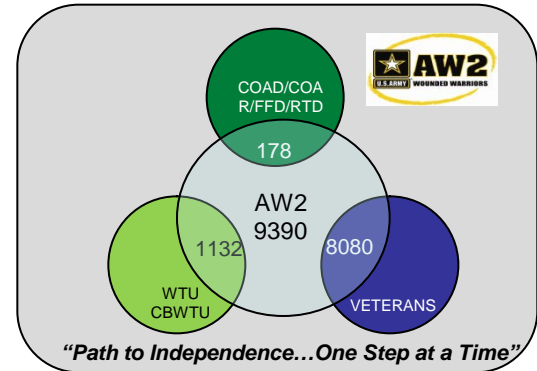
Themes

- Lack of policy/guidance
- Misunderstanding of roles of the interdisciplinary team
- Classroom-centric instruction does not adequately prepare cadre
- WTB staff is at risk of not having the skills and info necessary to assist with the mission to heal and transition
- Not enough sustainment or refresher training



Continuum of Care (Comprehensive Transition Plan)

"These leaders and health care professionals are charged with ensuring Soldier's needs are met, their care is coordinated, and their Families concerns addressed." DAIG Final Report



As of: 1 Nov 11

Soldier and Family Assistance Center
Specialty Care
Social Workers
Pharmacists
Chaplains
Legal Support
Physical Therapists
Occupational Therapists
Career and Education Readiness
Transition/Career Counseling
PEBLO
MEB Physician

Triad of Care and Interdisciplinary Team

Federal Recovery Coordinator
VA Liaison for Healthcare
OIF/OOF/OND Care
Management Team
Caregiver Support
Coordinators
Employment Counseling
Education Counseling
Transition Counseling



RTD /
REFRAD

WTU/
CBWTU

Army Wounded Warrior Advocate (AW2 Life Cycle Management Plan)

VA Integration and Hand Off

Veterans Affairs

Inprocessing
Goal Setting
Transition Review
Rehabilitation
Reintegration

MRDP

IDES

Post Transition

Family/Friends

Comprehensive Transition Plan
(CTP Domains – Career, Physical, Emotional, Social, Family, Spiritual)



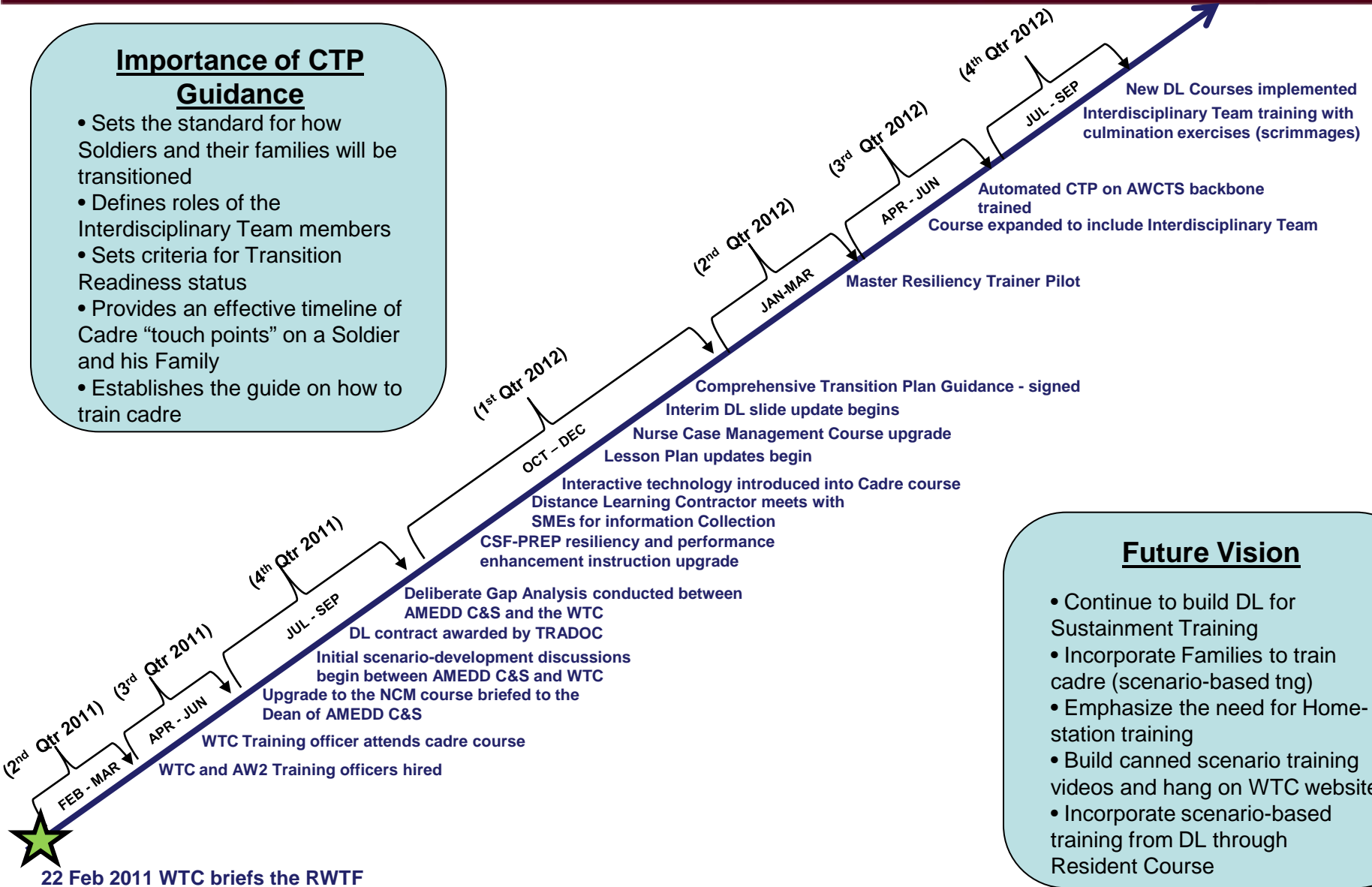
WTC Holistic Training Continuum



Cadre Training Evolution

Importance of CTP Guidance

- Sets the standard for how Soldiers and their families will be transitioned
- Defines roles of the Interdisciplinary Team members
- Sets criteria for Transition Readiness status
- Provides an effective timeline of Cadre "touch points" on a Soldier and his Family
- Establishes the guide on how to train cadre



Future Vision

- Continue to build DL for Sustainment Training
- Incorporate Families to train cadre (scenario-based tng)
- Emphasize the need for Home-station training
- Build canned scenario training videos and hang on WTC website
- Incorporate scenario-based training from DL through Resident Course



**U.S. ARMY
MEDICAL DEPARTMENT
CENTER & SCHOOL
Fort Sam Houston, Texas**

WTU Cadre Training
SHERRI EMERICH
09 December 2011

***We save lives...
on and off the
battlefield!***



MISSION

**We envision, design and train a premier
military medical force for full spectrum
operations in support of our Nation.**

VISION

**To be the foundation on which the
AMEDD is built, sustained and
transformed.**

***Our “people strengths”
of competency and
compassion make
Army Medicine...
Army Strong.***



AMEDDC&S

Department of Warrior Transition

Mission

To be the learning center and proponent including advisor and subject matter expert for Warrior Transition Unit cadre training throughout the Army



Background

- Program was established under the Army Medical Action Plan (AMAP) identifying standardized training as one of the ten quick wins of the AMAP (HQDA EXORD 118-07)
- Implemented per MEDCOM OPORD 07-55
- The Army Medical Department Center & School is proponent for the standardized training
- Program includes a blended learning solution that includes the 6I-F8/300-F36 distributed learning course (mandatory to all WTU/CBWTU staff/cadre) and the following resident courses:



Resident Courses

- 300-F39 course for Squad Leaders and Platoon Sergeants
 - Course Length: 2 weeks
 - Conducted approximately 10 times per year
 - Class Size: 80 (varies according to demand)
 - Additional Skill Identifier (ASI) Y9 per DA Pam 611-21
 - Special Duty Assignment Pay per MILPER Message 08-179



Resident Courses

- 6I-F12/340-F7 course for Company-level Leadership (1SG, XO, CO)
 - Conducted with 300-F39 course
 - Class size: 15 – 20 (varies according to demand)
- 6E-F2, phase 2 course for Nurse Case Managers
 - Conducted with other two courses
 - Class size: 30-48
 - Will be replaced with new Army Nurse Case Managers course
 - 6E-F2, phase 1 is a dL course that will remain with the new NCM course



Resident Courses

- Others are trained on a volunteer basis
 - Social Workers, Ombudsman, Occupational Therapists, Soldier and Family Hotline personnel, and administrative/operational personnel
- Courses are conducted together to maximize resources and share common curriculum
 - Instructor support
 - Administrative manpower
 - TDY instructors and speakers
- Also builds teamwork and collaboration among medical and non-medical members of the Triad



What type of training does the WTU cadre receive regarding RW case management

- Interdisciplinary team training
- CTP
- Accountability and Counseling regarding appointments (SL/PSG); engaging family as appropriate
- Accountability in a WTU/CBWTU
- Risk Communication – communicating in a high risk, low trust environment
- Case Management Standards
- Assessments in CTP
- Medication Reconciliation
 - Medical and non-medical dos and don'ts
- Transfer process
- Transition Review Process
- Army Wounded Warrior Program
- VA brief
- ACAP brief
- PDES Administration



What type of training does the WTU cadre receive regarding the CTP

Supporting Lessons

- Overview of CTP and its importance
- Purpose
- CTP tracks and domains
- Who owns it
- Process
- Timelines
- Roles and Responsibilities
- Automated CTP
- CTP Guidance
- Risk Mitigation Strategies
- PDES
- CSF-PREP
- Guest Speaker Command emphasis
- Adaptive Reconditioning
- Suicide Prevention & Intervention
- PTSD
- Drug & Alcohol Awareness
- Operational Stress Mgt
- Cultural Adaptability

Note: All lessons support the CTP process



Training regarding assessing WTU effectiveness (performance and accountability standards)

- Course requirements established based on needs from the field (Analysis)
- POI for the course with Task, Condition and Standard set
- Two resident course exams that include situational questions; one dL course exam
- Course updates based on needs from the field, independent inspections (DoD IG, DAIG, Gen Franks' report, RWTF), internal inspections (OIP) and Metrics Collection
- Standards enforced by the local commander
- New CTP Guidance provides roles and responsibilities
- Surveys: At the end of the Resident Course, 60 days post residence
- AMEDDC&S Quality Assurance Program



How does the training for WTU cadre differ from training for CBWTU cadre

- Standards are the same; execution may differ
 - SL vs PSG
 - Ratios
 - Daily Accountability (Face-to-face vs telephonic)
- CBWTU briefs all course attendees
- Risk Communication includes challenges of CBWTU accountability and case management
- Developing a new addition to current command and control lesson to specifically discuss CBWTU C2 (challenges, musters, work assignments, UCMJ, identifying WTU returns)

Case Management Training



Background Information

- DoD uses Case Management Society of America definition and standards of practice as core components of case management program
- Fundamentals of case management for MHS outlined in Medical Management guide
- Former case management education/orientation only offered to WTU case managers
 - Two week orientation course; with three days of case management specific education
 - Not a certification course
- GEN (Ret) Franks Task Force (April 2009) directed case management certification* program
- DAIG recommended scenario based training program
- DTM 08-33 mandates 10 on-line courses for case managers; training requirement sustained in draft Department of Defense Instruction 6024.20, Medical Management Programs in the Direct Care System and Remote Areas
- OPOD 11-20, Patient Centered Medical Home, directs case management education
- 80-hour distance education available
 - Optional course for case managers
 - 95 seats per fiscal year; in third option year



Core Competencies

- Derived from the Case Management Society of America Standards of Practice for Case Management¹
- Incorporate aspects of care unique to the military health system as identified in the Medical Management Guide²
- Six essential domains of practice for the case manager³
 - Case finding and intake
 - Provision of case management services
 - Outcomes evaluation and case closure
 - Utilization management
 - Psychosocial economic issues
 - Vocational concepts and strategies



What type of training does the WTU cadre receive regarding case management

- WTU Company Commanders and 1SGs participate in 90-minutes of instruction on Case Management Standards
 - CMSA Standards of Practice and how demonstrated in WTU/CBWTU
 - Role of case manager and interdisciplinary team across six domains of practice
- The role of the Nurse Case Manager in Warrior Transition Units and Community-Based Warrior Transition Units is incorporated into all aspects of instruction starting with the WTU overview on Day 1



Training regarding supporting and reaching out to family caregivers

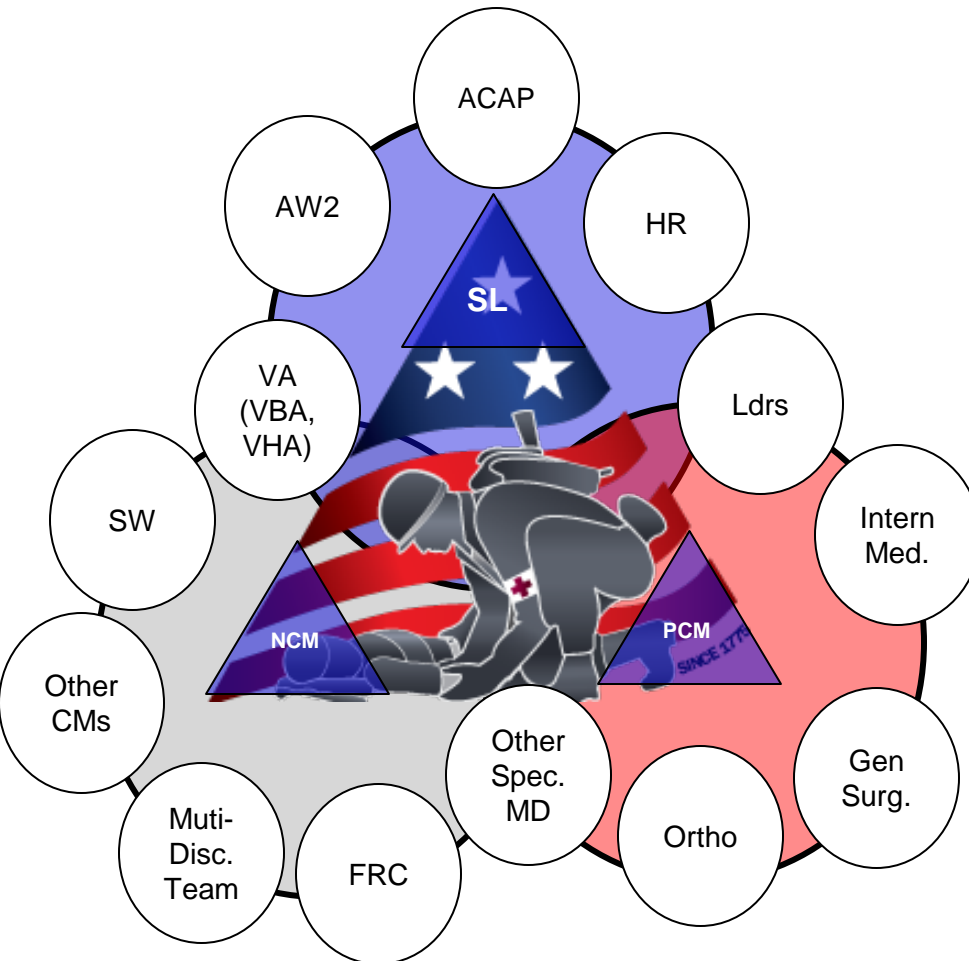
- Reaching out to the family in the CTP
 - Non-medical attendants
- Army Wounded Warrior Program
 - Family testimony
- Risk Communication
- CSF-PREP
- Annual Training
 - Emphasis of Family at Scrimmages and FTRs
- AER
- Future
 - AHF
 - SCAADL
 - VA Caregivers Compensation



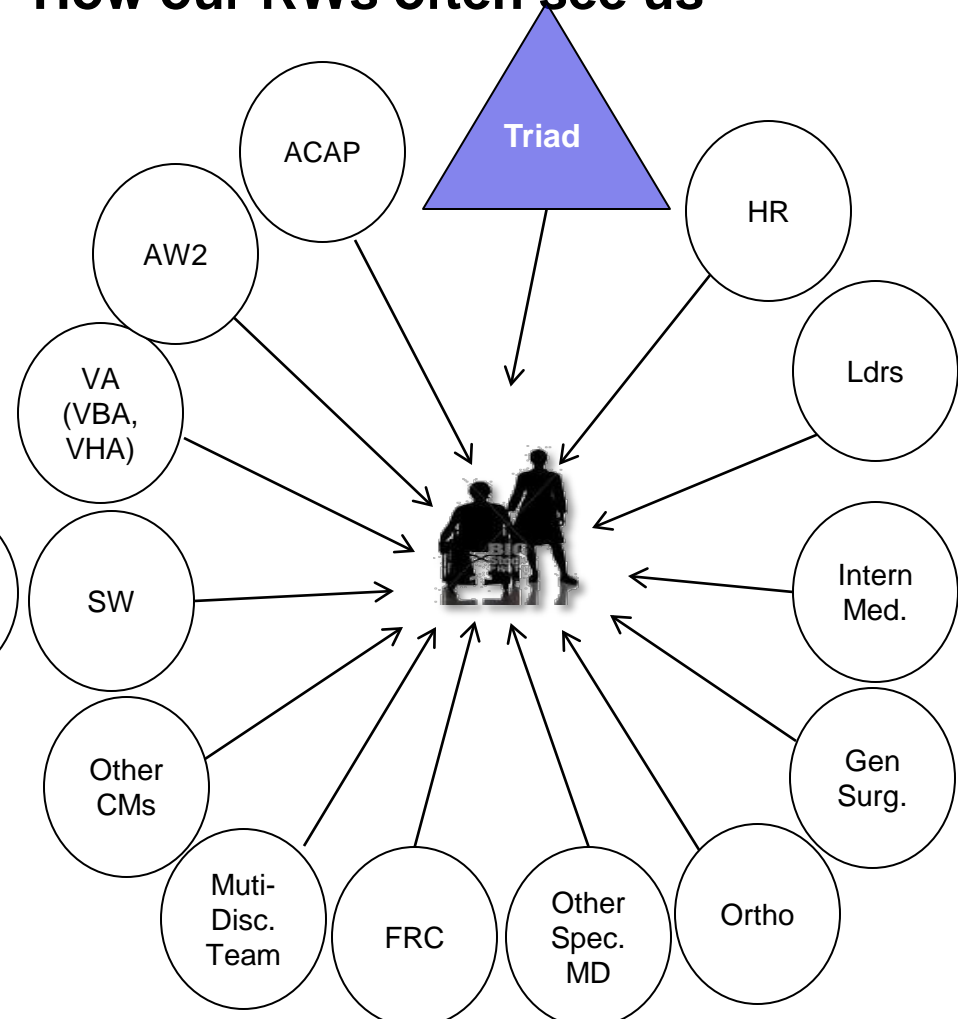
Training regarding working with the numerous other CMs working with Recovering Warriors

- Area of vulnerability
- Not currently specifically addressed during cadre training

How we see ourselves



How our RWs often see us





Case Management Course Development

- Driven by external and internal review and analysis
- Builds upon foundational material presented during WTU Cadre Orientation Courses
- Scenario driven
- Fosters interdisciplinary team, collaborative approach



Core Competencies

- Articulates the guiding principles of case management
- Understands the roles, functions and activities of case management
- Screens cases based on standard selection criteria, severity of illness and utilization concerns
- Completes comprehensive assessment of assigned cases
- Identifies problems or opportunities that would benefit from case management intervention
- Identifies short, intermediate and long term needs and develops a patient centered plan of care with the patient and/or family based on factual information
- Facilitates coordination, communication and collaboration to achieve goals and maximize outcomes
- Employs ongoing assessment and documentation; reviews responses of the patient and family to the plan of care and coordinates to identify trends that may provide opportunities for improvement
- Maximizes health, wellness, safety, adaptation and self care
- Demonstrates that outcomes are addressing patient and program goals
- Understands concepts of utilization management and disease management
- Terminates case management services in accordance with established criteria



Knowledge, Skills, Tasks Necessary to Achieve Competency

Knowledge

- History and evolution of case management
- Medical management fundamentals
 - Utilization Management
 - Disease Management
 - Case Management
- Case management standards
- Roles and functions of case managers
- Worker's Compensation
- Behavior Health Case Management
 - TBI
 - PTSD
 - MDD
 - SMI
- PDES
- Healthcare insurance, benefits, reimbursement systems
 - TRICARE
 - VA Benefits (VHA, VBA)
 - TSGLI
- Code of Conduct
- Family/caregiver support
- Case Management practice settings
 - Patient Centered Medical Home
 - Warrior Transition Unit
 - Medical Management Centers
 - Inpatient Case Management
- Polypharmacy
- Legal and ethical issues

Skills

- Case management process
- Communication
- Coordination
- Collaboration
- Management of behavior health patients
- Motivational Interviewing
- Conflict management
- Effective problem solving
- Case management plans, clinical pathways, protocols
- Goal setting
- Comprehensive Soldier Fitness
- Resiliency
- Healthcare/ life skills coaching
- Peer feedback
- Managing risk/risk communication
- Facilitating administrative coordination for issues that impact clinical care (i.e., Soldier orders)
- Transitional planning
 - Comprehensive Transition Plan
 - ACAP
 - Discharge Planning
- Quality and outcomes management
- Understanding military profiles
- Suicide prevention

Tasks

- Documentation
 - AHLTA (AIM Form)
 - Essentris
 - MODS
- Coding
- Workload and acuity capture
- Use of decision support tools
 - Clinical practice guidelines
 - Milliman/McKesson/ Interqual (or equivalent)
 - ICDB
 - Population Health Portal Tools
- Evidenced based practice/use of clinical practice guidelines
- Case transfer
- Case closure
- Execute Comprehensive Pain Management Campaign Plan tasks



Former WTU Cadre Orientation for Case Managers

- Overview of MEDCOM
- Overview of WTC
- Ombudsman Program
- Comprehensive Transition Plan
- Building the Soldier Athlete (PT for Soldiers on Profile)
- AW2
- Managing Risk/Assessment Tools
- Risk Communication
- Profiling
- Polypharmacy
- Staff Ride to SFAC/WFAC/CFI
- TRICARE
- ACAP
- AHLTA/AIM Form
- APDES
- Case Management Standards
- Case Management Process
- ADME/MRP/MRP2 (Orders)
- TRICARE
- MODS
- Provider Resiliency
- Centralized Transfer Process
- Goal Setting (Army Center for Enhanced Performance)
- TBI
- PTSD
- TSGLI



New Case Management Course

- Phase 1 – Completed via distance education (prerequisite for Phase II)
 - Complete DoD mandated MHS learn education courses
 - Complete WTU cadre orientation courses
 - Establishes competency in knowledge domain
 - Culminates with a comprehensive examination on all material administered prior to attending Phase 2 or day 1 of phase 2
- Phase 2 – Resident education course
 - Three week resident course to provide skills/task education
 - Second and third weeks run in conjunction with WTU cadre course
 - Scenario driven team exercises to actualize skills of case manager
- Phase 3 – Home station preceptorship
 - Four week preceptor guided learning
 - Weekly webinars to facilitate learning among the cohort (share lessons learned/issues)
 - Validate skills/tasks
 - Graduation occurs with return of validated competency assessment



Clinical Leader Orientation Program

- Warrior Transition Unit Primary Care Manager (PCM) education mandated in OPORD 07-55, Army Medical Action Plan
- DAIG recommends development of PCM course
- Initial course developed; ATRRS course number in system
- Course cancelled due to lack of participation
- PCM workload does not permit extensive time away for education
- Content presented at WTU Cadre Orientation course is not taught at the post-graduate level (commensurate with PCM learning needs)
- Senior Nurse Case Managers need additional leadership education not offered at WTU Cadre Orientation Course
- Senior Leader Orientation Program delivered quarterly for incoming WTU Brigade and Battalion commanders and MTF commanders may be a more appropriate venue for PCM and Senior Nurse Case Manager education



Clinical Leader Orientation Program

- Target audience
 - WTU Brigade and Battalion Surgeons
 - Company sized WTU Primary Care Managers
 - Senior Case Managers
 - Clinical OICs
- Provide CME/CE to attendees
- Small group interaction to facilitate discussion/learning
 - 17 BDE/BN Surgeons (20 on hand)
 - 12 Company Primary Care Managers
 - 9 Community Based Warrior Transition Unit Medical Officers
 - 64 Senior Nurse Case Managers



Clinical Leader Orientation Program Agenda

Senior Leader Orientation Program Common Content

- WTC Overview
- WTC Staff Briefs
- STARTC
- Legal
- AER
- COAD/COAR
- AW2
- OIP Trends/Best Practices
- Reserve Affairs
- Comprehensive Soldier Fitness
- Cadre Roles Panel Discussion
- CTP
- Adaptive Reconditioning
- AWCTS

Clinical Leader Specific Content

- VHA
- VBA
- Pharmacy
- Integrated Disability Evaluation System
- Expectations of a Primary Care Manager, Supervisor Nurse Case Manager
- Peer Feedback/Documentation
- Evidence Based Practice
- Clinical Practice Guidelines
- Data and where to find it



Best Practices, Innovations and Sharing

- Integrated team training
- Incorporation of input from the field
- OIP results
 - Scrimmage/FTR
- Incorporating Response Technology to resident training
 - Make learning more attractive to the learner
 - Provide feedback to learner and instructor
 - Gaming
 - Fun
- Updating current dL product
 - New analysis
 - Updated content
 - Improved interactivity



Best Practices, Innovations and Sharing

- New Army Nurse Case Manager course
- SMEs ensure current and relevant training
- End of course surveys leading to course improvements
- Paralympics Division of US Olympics added to program
- Additional scenarios and role-playing added to program
 - Communication role playing
 - Interactive Videos with decision tracks for PTSD and Leadership
- Army CP32 program for sharing
- Reading and sharing among educators
- Student surveys (implementing aggressive post-graduate surveys)
- Site visits
- Manpower review (set training staff TDA)



Conclusion

- We continue to enhance and improve our comprehensive training program
- We remain focused on promoting successful transition and independence through education for the Cadre, Recovering Warriors and their Families
- The CTP Guidance is the foundation for how we do business
- We orient cadre leaders to the unique operating environment of the WTU/CBWTU
- The unit continues to enforce the standards and the training of the non-clinical cadre
- New Army NCM course ensures NCMs are thoroughly trained once all phases are complete



The Army's Home for Health...

**Saving Lives and Fostering Healthy
and Resilient People**

~ Partnerships Built on Trust

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- ³Powell, Suzanne K. & Tahan, Hussein A. (2000) *Case Management: A Practical guide for Education and Practice*. 3rd Edition. Lippincott Williams & Wilkins.
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